



WISCONSIN LEGISLATIVE COUNCIL RULES CLEARINGHOUSE

Ronald Sklansky
Clearinghouse Director

Richard Sweet
Clearinghouse Assistant Director

Terry C. Anderson
Legislative Council Director

Laura D. Rose
Legislative Council Deputy Director

CLEARINGHOUSE RULE 04-032

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Revisor of Statutes Bureau and the Legislative Council Staff, dated October 2002.]

2. Form, Style and Placement in Administrative Code

a. The analysis specifies that the fees for health care providers for the 2004-05 fiscal year represent a 20% decrease compared with fees assessed in the 2003-04 fiscal year. However, with respect to mediation fees for the 2004-05 fiscal year, the analysis merely refers to an increase. It may be useful to similarly specify the percentage of increase in the analysis.

b. Section Ins 17.28 (6) (intro.) refers to “July 1, 2004, to and including June 30, 2005.” The phrase “to and including” should be changed to “to” inasmuch as s. 990.001 (4) (a), Stats., provides that the last day specified is included when time is computed.

c. In s. Ins 17.28 (6) (k) 2., (L) 2., (m) 2., and (n) 3., “employees” should be changed to “employees” to comport with the revised drafting style, as reflected in current rules.

4. Adequacy of References to Related Statutes, Rules and Forms

In s. Ins 17.28 (6) (o), “s. HFS 120.03 (10)” should be changed to “s. HFS 120.03 (13).”

5. Clarity, Grammar, Punctuation and Use of Plain Language

a. Section Ins 17.28 (6) (e) establishes the fee for a physician who practices fewer than 500 hours during the fiscal year under certain circumstances. If this refers to the 2004-05 fiscal year, it is unclear how it would be known whether the physician practices fewer than 500 hours during the fiscal year until the year is completed. To which fiscal year does it apply?

b. Section Ins 17.28 (6) (k) 1. a., b., and c., refer to the total number of partners and employed physicians and nurse anesthetists being a certain number (2 to 10, 11 to 100, and over 100). It is not clear on what date or over what period the measurement of the number of partners and employed physicians and nurse anesthetists applies. (This is in contrast to s. Ins 17.28 (6) (k) 2., which specifies the date on which employment is determined for other health care persons.)

A similar comment applies to s. Ins 17.28 (6) (L) 1. and (m) 1.

c. Section Ins 17.28 (6) (n) 2. refers to a fee that is “2.5% of the total annual fees assessed against all of the employed physicians.” It may be useful to include a cross-reference to the provision under which the fees are being assessed.

Also, it is noted that the assessment under s. Ins 17.28 (6) (n) does not refer to nurse anesthetists. Is this omission intentional?

d. Section Ins 17.28 (6) (p) 1. and 2. both refer to a percentage of the amount the entity pays as premium for its primary health care liability insurance. It is not clear if this refers to the premium paid for the 2004-05 fiscal year, the previous fiscal year, the calendar year, or some other time period.